

Provider Inspection Summary

For the period 06/01/2003 to 05/31/2006
Community Based Residential Facility
CLASS CNA (NONAMBULATORY)

Facility Information

Facility Name: WEST CARE TERRACE 1715 (410534)

Address: 1715 WESTMINSTER DR, GREEN BAY, WI 54302

License Status: REGULAR

Licensed/Certified/Registered 06/01/1998

Regional Office: NORTHEASTERN REGION (GREEN BAY), (920) 448-5240

Survey History

Survey ID: 0094634 **End Date:** 04/12/2005 **Type:** OTHER **Purpose:** SURVEY/COMPLAINT

Results: ENFORCEMENT ACTION

Statement of Deficiency: #10007143 Served 05/09/2005

<u>Deficiencies Cited</u>	<u>Subject Area</u>	<u>Compliance Verified</u>	<u>Corrected</u>
50.065(2)(bm)	OUT OF STATE BACKGROUND CHECKS		
50.065(6)(am)	FOUR YEAR CAREGIVER BACKGROUND REQUIREMENT		
83.14(7)(b)	CONTINUING EDUCATION		
83.14(8)	DOCUMENTATION		
83.32(2)(c)1	ANNUAL EVALUATION-PARTICIPATION		
83.32(2)(c)2	ANNUAL EVALUATION UPDATED		
83.53(2)(a)	DOORS EXCEPT PATIO DOORS		

Survey ID: 0094100 **End Date:** 02/11/2005 **Type:** OTHER **Purpose:** DESK REVIEW

Results: ENFORCEMENT ACTION

Statement of Deficiency: #10007081 Served 04/04/2005

<u>Deficiencies Cited</u>	<u>Subject Area</u>	<u>Compliance Verified</u>	<u>Corrected</u>
50.065(6)(b)	CREDENTIALLED CAREGIVERS	06/03/2005	Yes

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STATE OF WISCONSIN
Bureau of Quality Assurance
P.O. Box 2969
Madison WI 53701-2969

Survey ID: 0092716 **End Date:** 06/04/2004 **Type:** ABBREVIATED **Purpose:** SURVEY

Results: STATEMENT OF DEFICIENCY ISSUED

Statement of Deficiency: #10006969 Served 06/12/2004

<u>Deficiencies Cited</u>	<u>Subject Area</u>	<u>Compliance Verified</u>	<u>Corrected</u>
83.14(7)(b)	CONTINUING EDUCATION		

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STATE OF WISCONSIN
Bureau of Quality Assurance
P.O. Box 2969
Madison WI 53701-2969

Enforcement History

Date: 04/28/2005 **SOD #10007143** **Appealed: No**

Sanctions

COMPLY WITH REQUIREMENT
FORFEITURE---83.14(7)(b)

Date: 04/01/2005 **SOD #10007081** **Appealed: No**

Sanctions

COMPLY WITH REQUIREMENT

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Complaint History

Date Complaint Received: 03/31/2005

Date Investigation Completed: 04/15/2005

Subject Area(s)
RESIDENT RIGHTS
QUALITY OF LIFE

Result
NOT SUBSTANTIATED
NOT SUBSTANTIATED

SOD #

Date Complaint Received: 01/06/2005

Date Investigation Completed: 04/15/2005

Subject Area(s)
RESIDENT RIGHTS

Result
NOT SUBSTANTIATED

SOD #

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